

**MIDDLESEX COUNTY MEDICAL ASSOCIATION**

192

**Statement in opposition to**

**Senate Bill 192 – An Act Concerning Advanced Practice Registered Nurses and Primary Care Providers for Individual or Group Health Insurance Policies**

**Insurance and Real Estate Committee**

**February 25, 2010**

This statement is being submitted on behalf of the members of the Middlesex County Medical Association in opposition to Senate Bill 192 – An Act Concerning Advanced Practice Registered Nurses and Primary Care Providers for Individual or Group Health Insurance Policies. We had wished to be here today to testify in person, unfortunately times have changed and we are no longer able to both treat our patients and advocate for them. We now must do one or the other. Despite our strong feelings against this bill and the jeopardy that we believe this bill places our patients in, we are not able to testify before you today.

The bill before you would allow an insured or certificate holder to designate a participating, in-network physician or advanced practice registered nurse as such insured's or certificate holder's primary care provider. We feel that this will pose a significant health and safety risk to patients.

By allowing APRNs to be listed as primary care providers it creates an impression that APRNs are equivalent to physicians. They are not equivalent in training, and Connecticut law requires that APRNs collaborate with a physician. The training and educational requirements of an APRN simply do not prepare them to be named as primary care providers. Please consider for a moment that curriculums for medical students are standardized throughout the country, curriculums for APRNs are not. Physicians must complete at least 11 years of training while APRNs complete 6. Physicians complete on average 3200 hours of clinical training in medical school and 9000 hours during residency compared to 500 for APRNs. In addition, physicians must complete a minimum of 50 hours of continuing education per year while APRNs are not mandated to complete any. The substantial differences in education and training are clear. Our training and education prepare us to diagnose challenging diseases and illnesses, to safely prescribe and administer medications including controlled substances, and to develop and oversee a treatment plan. We do not believe that given the differences between physicians' training and education and that of an APRN, that they are adequately prepared to safely and independently become primary care providers.

**Jane Buss, MD, President**

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